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IN THE UNITED STATES PATENT OFFICE

Application: 10/505,469 § Applicant: FORTIN, Frederic et al
Filing Date: 08/20/2004 § Title of Invention:
Docket No: PUS-H002-001 § FLEXIBLE VERTEBRAL LINKING DEVICE
§ Art Unit: 3733

CERTIFICATE OF TRANSMISSION UNDER 37 CFR §1.8. I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office

On August 16, 2006

Typed or printed name of person signing this certificate: Frankie Scheiniller

Signature of person signing this certificate: F. Scheiniller

WITHDRAWAL FROM REPRESENTATION

Via fax to: 001 571 273 8300

Commissioner for Patents
US Patent and Trademark Office
P.O. Box 1450
Alexandria, Virginia 22313-1450
USA

Dear Sir,

Referring to the above-mentioned patent application, please take note that Dr. Sherman D. Pernia, US. Reg. No. 34,404 and John Moetteli, U.S. Reg. No. 35,289, are withdrawing as attorneys of record and should be removed as such in the patent database.

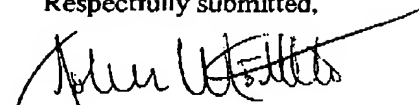
Please send all future correspondence to:

Mr. Frederic Fortin
c/o Hexabio S.A.
36, allée des Passerines
F-33600 Pessac
France

We attach a complete PTO Form /SB/83 for this purpose.

Thank you for your attention to this matter.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "John Moeteli", is written over a circular stamp.

Date : August 15, 2006

John MOETELI
U.S. Reg. No. 35,289
US and International Patent and
Trademark Attorney-at-law

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PTO/SB/83 (01-08)

Approved for use through 12/31/2008. OMB 0651-0035

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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

Application Number	10/505,469
Filing Date	08/20/2004
First Named Inventor	FORTIN, Frederic et al
Art Unit	3733
Examiner Name	WOODALL, Nicholas W.
Attorney Docket Number	PUS-H002-001

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number 51184

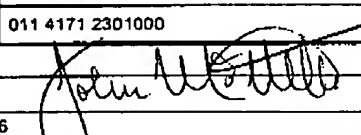
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The reasons for this request are:

CORRESPONDENCE ADDRESS

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<input checked="" type="checkbox"/> Firm or Individual Name	MOETTELI & ASSOCIES SARL		
Address	St. Leonhardstrasse 4		
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Signature			
Name	John Moetteli	Registration No.	35,289
Date	August 15, 2006	Telephone No.	011 4171 2301000

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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